

# Service Members, Veterans, and Mental Health

## Mental health is not a military problem, it is a societal issue.

Mental health conditions like Post-Traumatic Stress Disorder and Mild Traumatic Brain Injury are not unique to Service Members and Veterans—they can affect anyone. Stereotypes that label all Service Members and Veterans as “broken” are inaccurate and represent a missed opportunity for businesses and communities and are detrimental to the long-term success of the All-Volunteer Force. Efforts to assist those in need are vital, however, the majority of Service Members and Veterans are functioning and contributing in our communities today.



### Facts about Mental Health

- ♦ Post-Traumatic Stress Disorder (PTSD) is an anxiety disorder that some may develop after seeing or living through a dangerous event.<sup>1</sup>
- ♦ Studies indicate that anywhere from 2-17% of Veterans and Service Members and 6-8% of all Americans have been affected by PTSD.<sup>2</sup>
- ♦ While physicians and other experts, as well as the military community, use the term mild Traumatic Brain Injury (mTBI), most people know the injury as a concussion.<sup>3</sup>
- ♦ Common causes of mTBI include vehicle accidents, falls, sports and recreational activities and military training.<sup>4</sup>
- ♦ 85 - 95% of all mTBI cases result in full functional recovery.<sup>5</sup>
- ♦ More than 80% of Service Member TBIs occur while not deployed.<sup>6</sup>

### Talking Points

- ♦ Service Members and Veterans, like anyone else, can be affected by Post-Traumatic Stress Disorder.
- ♦ With 26% of the adults experiencing a diagnosable mental health issue each year, employers already confront mental health issues.<sup>7</sup>
- ♦ While Service Members may be at higher risk of experiencing traumatic events, they also benefit from factors like leadership and social support networks that create resiliency and reduce the effects of post-traumatic stress.<sup>8</sup>
- ♦ Post-Traumatic Stress exists on a continuum; everyone that experiences a traumatic event is affected by it in some way.

1. "Post-Traumatic Stress Disorder (PTSD)," National Institute of Mental Health, 1.

2. Lisa K. Richardson, et al, "Prevalence Estimates of Combat-Related PTSD: A Critical Review," Australia and New Zealand Journal of Psychiatry 44 (2010), 2 and Fran H. Norris and Laurie B. Slone, "Understanding Research on the Epidemiology of Trauma and PTSD," PTSD Research Quarterly, 24 (2013):3.

3. "Facts for Physicians About Mild Traumatic Brain Injury (MTBI)," Centers for Disease Control and Prevention, 2.

4. "What are the Leading Causes of TBI," Centers for Disease Control and Prevention, June 15, 2010.

5. Terri Tanielian and Lisa H. Jaycox, eds. Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery, (RAND, Santa Monica: 2008), 106.

6. "DOD Worldwide Numbers for TBI," Defense and Veterans Brain Injury Center, February 13, 2013.

7. Ronald C. Kessler, et al, "Prevalence, Severity, and Comorbidity of Twelve Month DSM-IV Disorders in the National Comorbidity Survey," Archives of General Psychiatry, 62 (2005), 4.

8. Barbara Van Dahlen, phone conversation with the author, October 17, 2013 and Joseph Geraci, Mike Baker, George Bonnano, Barend Tussenbroek and Loree Sutton, "Understanding and Mitigating Post-Traumatic Stress Disorder," in Leadership in Dangerous Situations, (Annapolis: Naval Institute Press, 2010), 85-6.



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